

**North Dakota Parks and Recreation Department
Official Geocaching Placement Permit**

This permit is valid for **24 months** from the date approved. After that date, the cache must be moved and a new location permit issued or removed from the premises.

Cache Owner Information:

Name: _____

Address: _____

Phone number: _____

E-mail address: _____

Cache name as listed on geocaching.com: _____

Physical description of container: _____

_____ "Official Geocache." Label _____ Water resistant _____ Photograph attached

Location coordinates: _____

Physical description of area: _____

_____ Virtual cache _____ On-site cache

_____ Multi-cache (5 max - list each location information on additional sheet)

_____ I understand that caches not in compliance with the terms of this permit will be removed from the property and this permit voided for failure to comply.

_____ I understand that I am to monitor this cache monthly and maintain it to be family friendly.

I have read and understand the terms of this permit and agree to comply accordingly. I will retain a copy of this permit for my records.

Signature of Applicant Date

APPROVED or DENIED

Justification if denied: _____

Facility Manager or Designee and Date Facility E-mail address

Permit Expires _____